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Bib Data Sheet

CONFIRMATION NO. 7153

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|---|---|--------------------------------|---|---------------------------------------|
| SERIAL NUMBER 10/783,903 | FILING OR 371(c) DATE 02/20/2004 RULE | CLASS 482 | GROUP ART UNIT 3764 | ATTORNEY DOCKET NO. PV-5CIP |
| APPLICANTS Webb Nelson, Woodinville, WA; ** CONTINUING DATA ***** This application is a CIP of 09/634,535 08/08/2000 ABN ** FOREIGN APPLICATIONS ***** <i>et</i> | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** <i>X</i> ** 05/14/2004 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i> Verified and Acknowledged <i>lee</i> Examiner's Signature Initials | | STATE OR COUNTRY WA | SHEETS DRAWING 4 | TOTAL CLAIMS 20 |
| | | INDEPENDENT CLAIMS 2 | | |
| ADDRESS 32132 | | | | |
| TITLE Device and method for initiating an exercise routine | | | | |
| FILING FEE RECEIVED 385 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |